

**NOTICE OF PROPERTY INCORRECTLY REPORTED
OR OMITTED FROM THE ASSESSMENT ROLL
FILED BY A PERSON OTHER THAN THE OWNER,
ASSESSOR OR EQUALIZATION DIRECTOR**This form is issued under authority of Section
211.154, MCL. Michigan State Tax Commission
Report.**OFFICE
USE
ONLY**

File No.

Assessment Unit No.

PLEASE PRINT OR TYPE

| | |
|-------------------------------------|--|
| PROPERTY OWNER | Name of Property Owner(s) |
| | Owner's Address (No. and Street, City, State, ZIP) |
| PERSON GIVING NOTICE | Name |
| | Address |

PROPERTY AND ASSESSMENT ROLL INFORMATION

| | | | |
|--|------------------------------|--|--|
| County Where Property is Located | | City or Township or Village and Township | |
| School District | Intermediate School District | Community College District | |
| Property Index No. (Or enter property description below) | | Property Classification | |

Answer the following question if this notice is for personal property. Did the owner complete and deliver a personal property statement on or before February 20 for each year that this notice covers? ☐ YES ☐ NO If NO, indicate year which a statement was not timely filed.

Property Description

| Assessed Value | | | Taxable Value | | |
|---|-----------------------------------|--------------------------|--|----------------------------------|-------------------------|
| Complete the applicable Assessed Value lines below when the notice is for a change in Assessed Value. | | | Complete the applicable Taxable Value lines below when the notice is for change in Taxable Value. For most personal property, the figures on the lines below will be the same as the figures under Assessed Value. For omitted real property, the amount of omitted Taxable Value may be less than the amount of omitted Assessed Value (see page 6 of STC Bulletin #3 of 1995). | | |
| Year(s) for Which Notice Was Given | Assessed Value on Assessment Roll | Requested Assessed Value | Year(s) for Which Notice Was Given | Taxable Value on Assessment Roll | Requested Taxable Value |
| | | | | | |
| | | | | | |
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Michigan State Tax Commission Findings. For incorrectly reported personal property, include a copy of the timely filed personal property statement and the amended personal property statement. For omitted real property, provide a record card or other documentation showing that the omitted real property was not previously included in the assessment.

Signature Chairperson/Executive Secretary, Michigan State Tax Commission

Date

TAX RATE INFORMATION (To be completed by the assessor)

If this notice is for either or both of the tax years immediately preceding the current year, the assessor shall list for each year covered by this notice the total tax rate levied in the city or township in which the property is located. List the total village rate separately, if applicable. If this notice is for omitted real property upon which "millage rate" special assessments were levied, list those rates separately below. Do not include special assessments levied in specific dollar amounts.

| Year Covered by Notice | SUMMER Total Tax Rate Levied | WINTER Total Tax Rate Levied | Total Annual Tax Rate Levied |
|---------------------------|---------------------------------|---------------------------------|---------------------------------|
| | | | |
| | | | |

SPECIAL ASSESSMENT RATES. Complete lines below for special assessment millage rates only.

| Year Covered by Notice | SUMMER Special Assessment Rate Levied | WINTER Special Assessment Rate Levied | Total Annual Special Assessment Rate Levied |
|---------------------------|--|--|--|
| | | | |
| | | | |

Additional comments or explanations:

ASSESSOR'S CONCURRENCE OR DISAGREEMENT WITH THIS REQUEST

This section must be completed by the assessor.

- ☐ I **CONCUR** with this request for corrected Assessed Value and/or Taxable Value.
- ☐ I **DO NOT CONCUR** with this request for corrected Assessed Value and/or Taxable Value. (The assessor who checks this box must submit to the State Tax Commission an explanation of the reason for not concurring).

| | | |
|---|-------|--------------------------|
| Name of Assessor | Title | Assessor Certificate No. |
| Address (No. and Street, City or Post Office, State, ZIP) | | |
| Signature of Assessor | Date | Telephone No. |

OWNER'S CONCURRENCE OR DISAGREEMENT WITH THIS REQUEST

This section must be completed by the property owner.

- ☐ I **CONCUR** with this request for corrected Assessed Value and/or Taxable Value.
- ☐ I **DO NOT CONCUR** with this request for corrected Assessed Value and/or Taxable Value. (The owner who checks this box must submit to the State Tax Commission an explanation of the reason for not concurring).

Did the property covered by this notice change ownership during the time period starting with the earliest year for which a change is being requested up to the present? ☐ NO ☐ YES If YES, give date.

| | | |
|-----------------------------|------|---------------|
| Signature of Property Owner | Date | Telephone No. |
|-----------------------------|------|---------------|

**MAILING
INSTRUCTIONS**

Return this completed form to:

State Tax Commission, Michigan Department of Treasury, P.O. Box 30471, Lansing, MI 48909-7971